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OR  
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<b>Application Number</b>	10/509810
<b>Filing Date</b>	September 30, 2004
<b>First Named Inventor</b>	JOHN ZIMMERMAN
<b>Title</b>	METHOD AND SYSTEM FOR PROVIDI
<b>Art Unit</b>	2623
<b>Examiner Name</b>	Sahar A. Gaig
<b>Attorney Docket Number</b>	PHUS020099

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.**OR**☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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**OR**☐ I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

Practitioner(s) Name	Registration Number

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☐ Applicant/Inventor.**OR**☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on \_\_\_\_\_.

**SIGNATURE OF Applicant or Assignee of Record**

Signature	/Michael E. Marion/	Date	May 11, 2009
Name	MICHAEL E. MARION	Telephone	914-333-9641
Title and Company	Authorized Signatory - Koninklijke Philips Electronics N.V.		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below".

☐ \*Total of \_\_\_\_\_ forms are submitted.

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